

## PROJECT 10073 RECORD CARD

1. DATE <u>23 August 52</u>	2. LOCATION <u>Navarre, Minnesota</u>	12. CONCLUSIONS <input checked="" type="checkbox"/> Balloon <input type="checkbox"/> Probably Balloon <input type="checkbox"/> Possibly Balloon						
3. DATE-TIME GROUP Local <u>10:00 CST</u>	4. TYPE OF OBSERVATION <input checked="" type="checkbox"/> Ground-Visual <input type="checkbox"/> Ground-Radar <input type="checkbox"/> Air-Visual <input type="checkbox"/> Air-Intercept Radar	5. PHOTOS <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6. SOURCE <u>civilian</u>	7. LENGTH OF OBSERVATION <u>5-6 seconds</u>	8. NUMBER OF OBJECTS <u>1</u>	9. COURSE <u>N</u>	10. COMMENTS Report does not follow 200-5.	11. CONCLUSIONS <input type="checkbox"/> Was Aircraft <input type="checkbox"/> Probably Aircraft <input type="checkbox"/> Possibly Aircraft  <input type="checkbox"/> Was Astronomical <input type="checkbox"/> Probably Astronomical <input type="checkbox"/> Possibly Astronomical  <input type="checkbox"/> Other <input checked="" type="checkbox"/> Insufficient Data for Evaluation <input type="checkbox"/> Unknown
13. BRIEF SUMMARY OF SIGHTING <u>Silver. very fast. Erratic</u>								

30. Please add here any further comments which you believe are important.  
Use additional sheets of the same size paper, if necessary.

THIS OBJECT TRAVELED AT A TERRIFIC  
RATE OF SPEED AND MOVED AS NO CONVEN-  
TIONAL AIRCRAFT I HAVE EVER SEEN

## PROJECT 10073 WORKSHEET

## I. GENERAL

1. DATE	2. LOCATION	3. TIME
43 Aug 52	Newark, Minn.	Local: 1045-25 Zebra: 1640
4. WAS OBJECT OBSERVED FROM THE GROUND?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Naked Eye <input type="checkbox"/> Binoculars <input type="checkbox"/> Telescope <input type="checkbox"/> Theodolite
5. WAS OBJECT OBSERVED BY GROUND RADAR?		<input type="checkbox"/> Yes <input type="checkbox"/> By One Set <input type="checkbox"/> By Two Sets <input type="checkbox"/> By Three Sets
6. WAS OBJECT OBSERVED FROM THE AIR?		<input type="checkbox"/> Yes <input type="checkbox"/> A/C Observed Object <input type="checkbox"/> Interception Attempted <input type="checkbox"/> No Intercept Attempted
7. WERE AIRCRAFT SCRAMBLED TO INTERCEPT?		<input type="checkbox"/> Yes <input type="checkbox"/> A/C Scrambled <input type="checkbox"/> Visual Contact Made <input type="checkbox"/> A/I Contact Made <input type="checkbox"/> No Contact Made
8. DID OBJECT CHANGE DIRECTION AT ANY TIME?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> Normal <input checked="" type="checkbox"/> Violent
9. IF OBJECT WAS A "LIGHT", WAS IT:		<input type="checkbox"/> Blinking <input type="checkbox"/> Steady
10. LENGTH OF TIME IN SIGHT:		<input checked="" type="checkbox"/> 1-15 Seconds <input type="checkbox"/> 1-5 Minutes <input type="checkbox"/> Over 10 Minutes
11. REPORTING AGENCY (Unit Number and Mailing Address)		
<u>Hq. 31st Air Division, Fort Snelling, Minn.</u>		

## II. ASTRONOMICAL DATA

12. WHAT ASTRONOMICAL ACTIVITY WAS NOTED?

N/A

13. DID OBJECT APPEAR TO ARCH DOWNWARD?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
14. DID OBJECT HAVE A TAIL?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
15. DID OBJECT APPEAR TO DISINTEGRATE?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
16. TIME OF SIGHTING RELATIVE TO SUNRISE OR SUNSET (Data From Air Almanac)	<input type="checkbox"/> Night <input checked="" type="checkbox"/> Day <input type="checkbox"/> Sunrise <input type="checkbox"/> Sunset	

## III. AIRCRAFT DATA

17. WERE AIRCRAFT NOTED IN AREA?	<input type="checkbox"/> Yes <input type="checkbox"/> One Aircraft <input type="checkbox"/> More Than One Aircraft	<i>One</i> <input checked="" type="checkbox"/> No
18. WAS ANY SOUND HEARD?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
19. WERE THERE INDICATIONS OF HIGH BACKGROUND NOISE?	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
20. WAS THE OBJECT VIEWED ABOVE 45° ELEVATION?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

## IV. BALLOON DATA

21. WERE BALLOONS RELEASED IN AREA?  Yes  No

22. TIME SINCE SCHEDULED BALLOON RELEASE: \_\_\_\_\_ Minutes

23. POSSIBLE BALLOON LAUNCH SITES DOWNWIND OF SIGHTING:

a.	Location	Type	Launching Agency	Lighted?		Describe Lighting
				Yes	No	
b.						
c.						
d.						

(attach overlay)

## V. EVALUATION

21. EVALUATION OF SOURCE:

- Excellent
- Good
- Fair
- Poor
- Unreliable
- Extremely Doubtful
- Hoax

22. DETAILS OF REPORT:

- Good
- Fair
- Poor
- Insufficient to Evaluate

23. FINAL EVALUATION:

- Was Balloon
- Probably Balloon
- Possibly Balloon

- Was Aircraft
- Probably Aircraft
- Possibly Aircraft

- Was Astronomical
- Probably Astronomical
- Possibly Astronomical

- Other: \_\_\_\_\_
- Insufficient Data For Evaluation

- Unknown

24. COMMENTS:

## PROJECT 10073 WEATHER DATA SHEET

1. DATE OF OBSERVATION	2. TIME OF OBSERVATION	3. STATION OBSERVING			
<b>4. WINDS ALOFT:</b>					
ALTITUDE (feet)	VELOCITY (knots)	DIRECTION (degrees)	ALTITUDE (feet)	VELOCITY (knots)	DIRECTION (degrees)
0			25,000		
1,000			30,000		
2,000			35,000		
3,000			40,000		
4,000			45,000		
5,000			50,000		
6,000			55,000		
7,000			60,000		
8,000			65,000		
9,000			70,000		
10,000			75,000		
12,000			80,000		
14,000			85,000		
16,000			90,000		
18,000			95,000		
20,000			100,000		
5. WAS AN INVERSION LAYER NOTED? (If yes, at what altitude?)			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6. WERE ANY THUNDERSTORMS NOTED IN AREA? (If yes, at what quadrant?)			<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7. CLOUD COVER: ____ tenths at ____ feet. ____ tenths at ____ feet.			8. VISIBILITY WAS <u>CHU</u> MILES.		
9. COMMENTS:					

HEADQUARTERS  
31ST AIR DIVISION  
FORT SNELLING, MINNESOTA

WD 319.1

SUBJECT: FLYOBRPT

28 AUG 1952

TO: Chief, Air Technical Intelligence Center  
Wright-Patterson Air Force Base  
Dayton, Ohio

Forwarded herewith is FLYOBRPT in accordance with AFL 200-5, 29 April  
1952.

FOR THE COMMANDING GENERAL:

*Halbert B. Hemitt*

1 Incl  
FLYOBRPT (1 cy)

HALBERT B. HEMITT  
MAJOR  
ADJUTANT

AIR TECHNICAL INTELLIGENCE CENTER  
WRIGHT-PATTERSON AIR FORCE BASE  
OHIO

4 September 1952

Mr. [REDACTED]

Mound, Minnesota

Dear Mr. [REDACTED]

Your recent report of unidentified aerial phenomena has been received by the Air Technical Intelligence Center. Inclosed is a questionnaire, which, when completed by you and returned in the inclosed, self-addressed envelope, will aid in standardizing the data and will provide a complete record of the occurrence.

Your interest in reporting the matter and your public spirited desire to be of service are greatly appreciated.

Sincerely yours,

*Robert E. Kennedy*  
ROBERT E. KENNEDY  
Major, USAF  
Air Adjutant General

2 Incls  
a/s

61-6166-16

TENTATIVE  
OBSERVERS QUESTIONNAIRE

## **SECTION A**

1. When did you see the object:

1.1 Date: 23 Aug 1952  
Day Month Year

1.2 Time of Day: 10 40 A.M. or P.M. (Circle One)  
Hrs. Min.

1.3 Time Zone: (Circle One):

- a. Eastern  
b. Central  
c. Mountain  
d. Pacific  
e. Other \_\_\_\_\_

(Circle One): a. Daylight Saving  
b. Standard

1.4 Circle one of the following to indicate how certain you are of your answer to the above question 1.2:

- a. Certain  
b. Fairly certain  
c. Not very sure  
d. Just a guess

2. Where were you when you saw the object:

Postal Address NEARLC MIL Country  
City or Town State

**Additional Remarks:**

3. Where were you located when you saw the object:

(Circle One):

- a. Inside a building
- b. In a car
- c. Outdoors
- d. In an airplane
- e. At sea
- f. Other \_\_\_\_\_

### 3.1 Were you:

(Circle One):

- a. In the business section of a city?
- b. In the residential section of a city?
- c. In open countryside?
- d. Flying near an airfield?
- e. Flying over a city?
- f. Flying over open country?
- g. Other Small Town

4. How did you happen to notice the object? GLANCED UP TO  
WATCH TWO P-51 FIGHTERS

5. When did you report to some official that you had seen the object?

Day \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_  
 Not sure of date  
 APPROX. ~~10~~ 9 DAYS  
 LATER

SECTION B

6. What were you doing at the time you saw the object? FILLING A  
CAR WITH GAS IN A FRIENDLY STATION

6.1 What had you been doing for the 30 minutes before you saw the object?  
 Try to list the activity or activities and the approximate amount  
 of time spent on each.

NOT POSITIVE - I BELIEVE I SPENT  
MOST OF THE 30 MIN. TALKING WITH  
FRIENDS IN STATION

7. Were you moving at any time while you saw the object? (Circle One):

Yes      or      No

IF you answered YES, then complete the following questions:

7.1 What direction were you moving?

- (Circle One):    a. North                         e. South  
                          b. Northeast                   f. Southwest  
                          c. East                           g. West  
                          d. Southeast                   h. Northwest

7.2 How fast were you moving? \_\_\_\_\_ miles per hour.

7.3 Did you stop at any time while you were looking at the object?

(Circle One):    Yes      or      No

8. What direction were you looking when you first saw the object?

- (Circle One):    a. North                         e. South  
                          b. Northeast                   f. Southwest  
                          c. East                           g. West  
                          d. Southeast                   h. Northwest

8.1 What direction were you looking when the object disappeared?

- (Circle One):

  - a. North
  - b. Northeast
  - c. East
  - d. Southeast
  - e. South
  - f. Southwest
  - g. West
  - h. Northwest

8.2 Circle one of the following to indicate how certain you are of  
your answer to the above question and preceding question (8 and  
8.1).

- a. Certain      c. Not very sure  
b. Fairly certain      d. Just a guess

9. Were you wearing eye glasses when you saw the object? (Circle One):

Yes or No

**10. How was the object seen?**

- (Circle One):

  - a. Through window glass
  - b. Through windshield
  - c. Through binoculars
  - d. Through telescope
  - e. Through theodolite
  - f. Through sunglasses
  - g. Through open space
  - h. Other

11. What do you remember about the weather conditions at the time you saw the object?

### 11.1 CLOUDS (Circle One)

- a. Clear sky
  - b. Hazy
  - c. Scattered clouds
  - d. Thick or heavy clouds
  - e. Don't remember

### 11.3 WEATHER (Circle One)

- a. Dry
  - b. Fog, Mist, or light rain
  - c. Moderate or heavy rain
  - d. Snow
  - e. Don't remember

**11.2 WIND (Circle One)**

- a. No wind
  - b. Slight breeze
  - c. Strong wind
  - d. Don't remember

**11.4 TEMPERATURE (Circle One)**

- a. Cold
  - b. Cool
  - c. Warm >
  - d. Hot
  - e. Don't remember

**SECTION C**

12. Estimate how long you saw the object?

—      —      50.6  
Hours      Minutes      Seconds

12.1 Circle one of the following to indicate how certain you are of your answer to Question 12:

a. Certain  
b. Fairly sure

c. Not very sure  
d. Just a guess

13. Did the object look: (Circle One) Solid or Transparent

14. Did the object at any time:

(Circle One for each question)

- 14.1 Change direction?  
14.2 Change speed?  
14.3 Change size?  
14.4 Change color?  
14.5 Break up into parts or explode?  
14.6 Give off smoke?  
14.7 Change brightness?  
14.8 Flicker, throb, or pulsate?  
14.9 Remain motionless?

<u>Yes</u>	<u>No</u>	<u>Don't know</u>

15. Did the object give off a light? (Circle One): Yes No Don't know

15.1 IF you answered YES, what was the color of the light? \_\_\_\_\_

16. Tell in a few words the following things about the object?

16.1 Sound None - Too much noise from P-51's

16.2 Color JAME AS SILVER AIRCRAFT - LOT OF REFLECTION

17. IF there was MORE THAN ONE object, then how many were there? 1

Draw a picture of how they were arranged and put an arrow to show the direction they were traveling.

18. Did the object at any time:

18.1 Move behind something? (Circle One) Yes No Don't know

IF you answered YES, then tell what it moved behind.  
\_\_\_\_\_

18.2 Move in front of something? (Circle One) Yes No Don't know

IF you answered YES, then tell what it moved in front of.

18.3 Blend with the background? (Circle One) Yes  No  Don't know

19. Which of the following objects is about the same actual size as the object you saw? (Circle One):

- |                  |                           |
|------------------|---------------------------|
| a. Pea           | f. Automobile             |
| b. Baseball      | g. Small airplane         |
| c. Basketball    | h. Large airplane         |
| d. Bicycle wheel | i. Dirigible              |
| e. Office desk   | j. Other <i>GOLF BALL</i> |

19.1 Circle one of the following to indicate how certain you are of your answer to Question 19.

- a. Certain  
b. Fairly certain  
c. Not very sure  
d. Uncertain

20. Try to tell the following things about the object:

20.1 How high above the earth was it? Don't know feet.

20.2 How far was it from you? Don't know feet or \_\_\_\_\_ miles.

20.3 How fast was it going? 60 miles per hour. TERRIFICALLY FAST

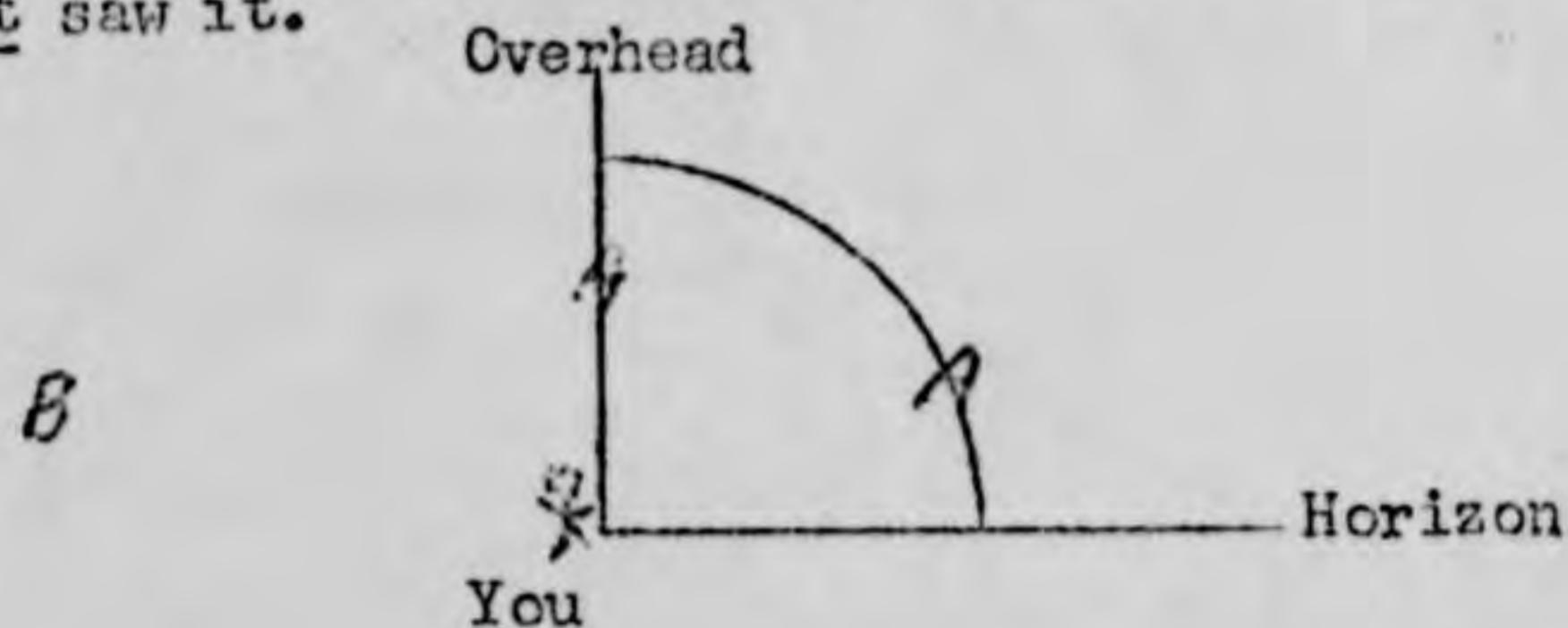
20.4 Circle one of the following to indicate how certain you are of your answer to the above questions:

- a. Certain  
b. Fairly certain  
c. Not very sure  
d. Just a guess

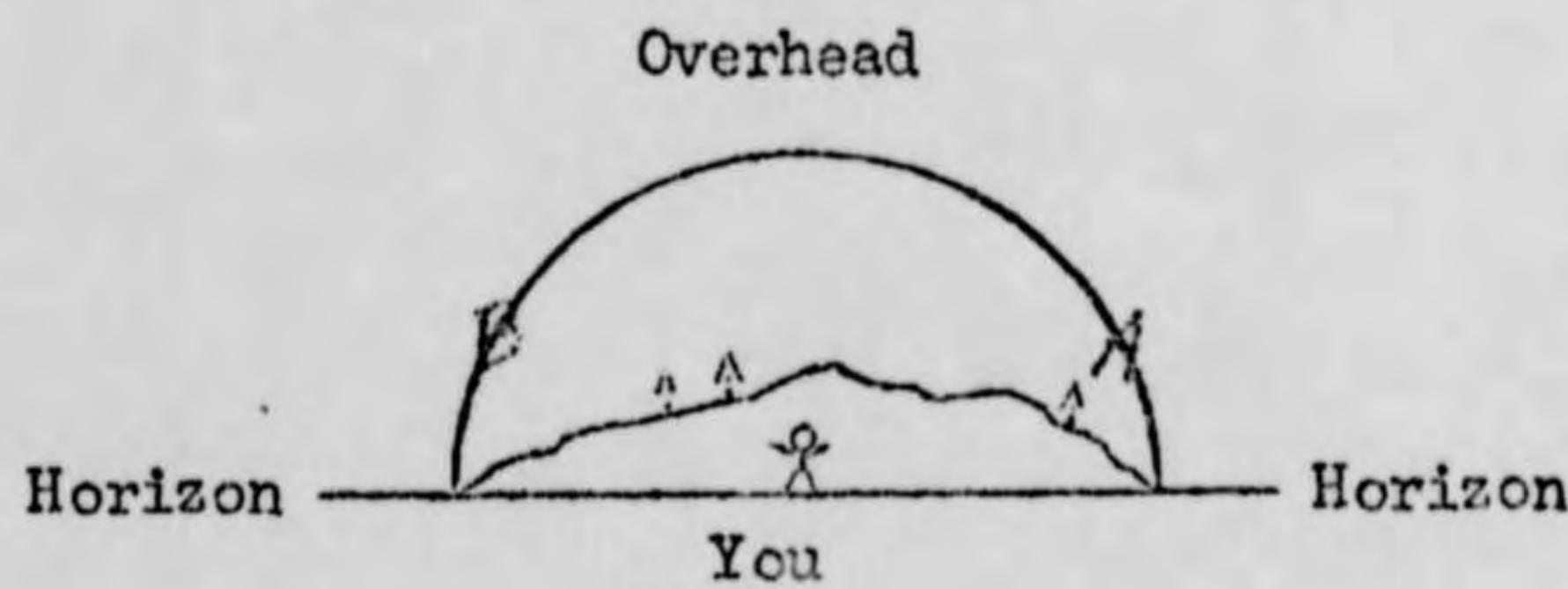
21. How did the object disappear from view?

## SECTION D

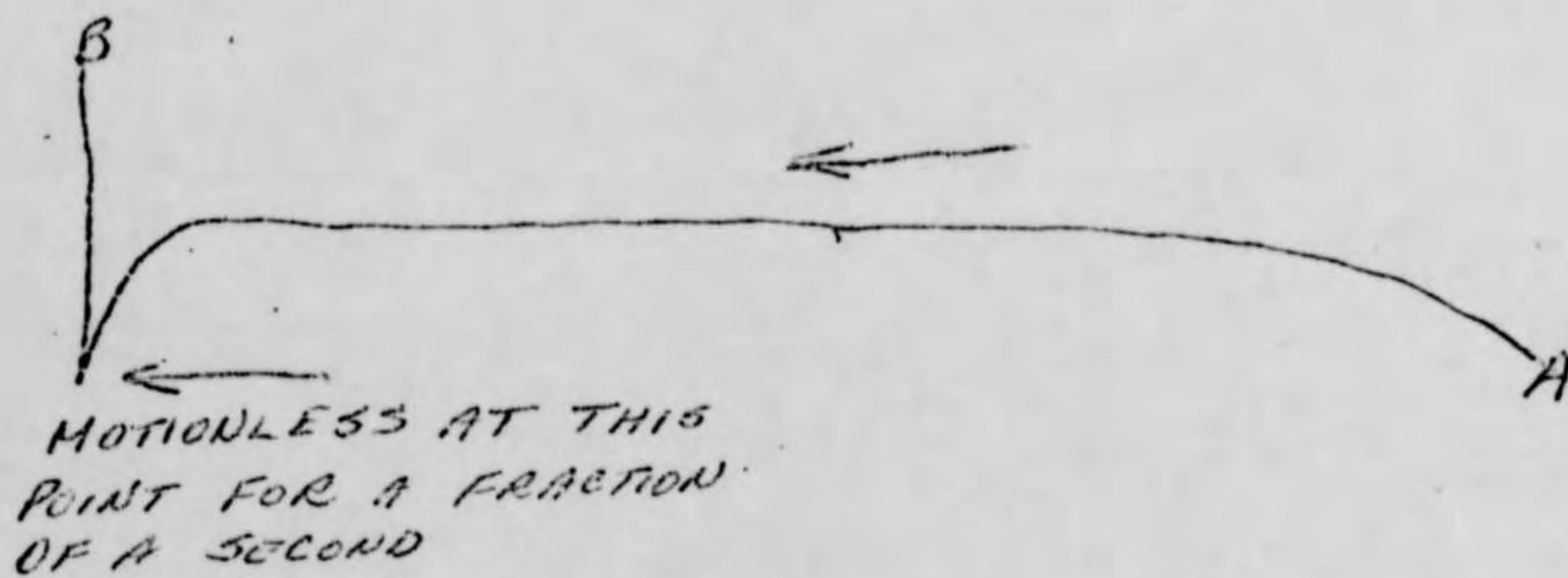
22. In the following sketch, imagine your eye at the point shown. Place an "A" on the curved line to show how high the object was above the horizon (skyline) when you first saw it. Place a "B" to show where it was when you last saw it.



23. In the following sketch place an "A" at the position the object was when you first saw it, and a "B" at its position when you last saw it.



24. Draw a picture that will show the motion that the object made. Place an "A" at the beginning of its path and a "B" at the end of its path.



25. Draw a picture that will show the shape of the object. Label and include in your sketch any details of the object that you saw and place an arrow beside the drawing to show the direction the object was moving.

PERFECTLY ROUND - THE SIZE OF A GOLF BALL  
NO DISTINGUISHING MARKS VISIBLE

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SECTION E

26. Was this the first time that you have seen an object like this?

(Circle One): Yes or No

26.1 IF you answered NO, then when, where, and under what conditions did you see other ones? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

27. In your opinion what do you think the object was and what might have caused it?

*I don't know*

28. Give the following information about yourself:

NAME \_\_\_\_\_  
Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

ADDRESS \_\_\_\_\_  
Street \_\_\_\_\_ City \_\_\_\_\_ Zone \_\_\_\_\_ State \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

What is your present job? MACHINIST INSPECTOR

Age 23

Sex MALE

29. Was anyone else with you at the time you saw the object?

(Circle One): Yes or No

29.1 IF you answered YES, did they see the object too?

(Circle One): Yes or No

29.2 Please list their names and addresses: